NOAA FORM 56-40A (09-92)

U.S. Department of Commerce National Oceanic and Atmospheric Administration

## PERSONAL DATA RESUME

NOAA COMMISSIONED CORPS													
I. PERSO	DNAL DA	TA											
NAME: MS MR	LAST	FIRST				MIDDLE				BIRTH DATE (mm/dd/yyyy)		U.S. CITIZEN Yes No	
Present Address							ŀ	Home Phone Work Phone				Ext.	
								E-mail address: (optional)					
City State				State	Zip			Height Weight Color vision deficiency?					
Permanent Address								Glasses prescribed? Yes No L:20/			ision R: 20/		
City				State Zip				Date available for Commissioning		Any physical limitations?			
II. COLLEGE INFORMATION													
Name and Location of College(s) Attended			_	ntes nded To	Degree Earned	Graduation Date		ourses Studied - Major 2 - Minor	Gra Ba	ade sis	Overall GPA	Major GPA	
Semester or Quarter Hours Earned in:  Semester Quarter Calculus Physics						Physics	То	Total Science and Engineering Hours					
College Honors, Professional Societies, Fraternities, and Activities:													
		INFORMATION	١										
Dates EmployedFromToName and Add			dress of E	r(s)		D	Description of Work				Hours per Week		
IV. MILIT													
ROTC (In	dicate bra	anch of service,	duration	of service	e and obliga	ation and grade)	)						
Previous Branch of Service				USA		USN		USCG		m	То	Grade	
Active Duty Reservist Obligation				OAA cialty	USAF	USMC		USPHS Soloctive Service (	lace				
Obligation	·		Spe	ыапу	Selective Service Class								
The Privacy Act of 1974 requires that you be given certain information in connection with the information solicited on the attached forms. The data is required under USC 853t; S USC 301; and 44 USC 3101. The furnishing of this data is voluntary for use in determining your qualifications for appointment in the NOAA Corps. Failure to provide the requested data will preclude your consideration for appointment													
I certify that all information provided in this resume is correct to the best of my knowledge													
SIGNATU	IKE:					Date:							